VZCZCXRO1084 RR RUEHBL RUEHED DE RUEHLO #1763/01 1301058 ZNR UUUUU ZZH R 101058Z MAY 07 FM AMEMBASSY LONDON TO RUEHC/SECSTATE WASHDC 3356 INFO RUEHRO/AMEMBASSY ROME 3377 RUEHFR/AMEMBASSY PARIS 2870 RUEHBS/USEU BRUSSELS RUEHKO/AMEMBASSY TOKYO 1035 RUEHOT/AMEMBASSY OTTAWA 1027 RUEHED/AMCONSUL EDINBURGH 0752 RUEHBL/AMCONSUL BELFAST 0804 RUEHMO/AMEMBASSY MOSCOW 2265 RUEHRL/AMEMBASSY BERLIN 2440

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E.O. 12958: N/A TAGS: <u>TBIO</u> <u>SENV</u> <u>UK</u>

SUBJECT: UK SUPPORT FOR MALARIA PROGRAMS

REF STATE 58735

11. Summary. The UK maintains active programs to combat malaria with specific countries and through international organizations. It also funds malaria research. It marked World Malaria Day through a press release and by the visit by International Development Secretary Hilary Benn to malaria related sites in Rwanda on that

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day. It has not signaled to us plans to increase malaria program funds, but the office of the Chancellor (and likely next Prime Minister) Gordon Brown has indicated his personal interest in developing a malaria program in conjunction with the U.S. and perhaps other G-8 members. End Summary.

- 12. In response to embassy's demarche on G-8 efforts on malaria, Team Leader for Malaria at the UK Department for International Development (DfID) Delna Ghandhi provided the information below on current UK programs. She did not indicate, nor did her colleague, Tim Stern, at HM Treasury's Global Health International Poverty Reduction Team, that the UK was contemplating any increases to these programs.
- 13. Separately, however, the office of Chancellor Brown contacted the embassy on Malaria Action Day for information on U.S. programs, which we provided, drawing on reftel and the fightingmalaria.gov website. The Chancellor's office signaled that he was personally interested in exploring how to increase international cooperation in the fight against malaria. We will continue to follow up with his staff to determine how he would like to proceed.
- 14. Begin Text of UK response: We support countries to develop strong and sustainable health services to address all causes of illness including malaria. This allows countries to invest in training and expansion of the number of health workers.

DFID provides direct support to malaria control in several countries. Examples include:

Nigeria: GBP 50 million to improve malaria control. Malaria is the leading cause of child mortality in Nigeria, causing a quarter of a million deaths a year. It is also a significant factor in maternal mortality. This program will provide subsidized bed nets for the poor and vulnerable, appropriate ACT treatment for children and intermittent preventive treatment of pregnant women. It aims to directly prevent 220,000 deaths.

Kenya: DFID has committed GBP 47.4 million for social marketing of

insecticide treated nets (ITNs), with the goal of reaching 60% coverage of children under five and 40% coverage of pregnant women by the end of 2007, by selling 11.1 million nets at highly subsidised and affordable prices.

Malawi: Delivery of ITNs is combined with other services. A nationwide programme has been in operation through ante-natal services since 2002. More than 100,000 ITNs have been delivered every month since the programme began, and solid results achieved. ITN coverage of under-fives has risen from around 8% in 2000 to more than 60% in some districts in 2006.

Ghana: Our support has helped procure 1.8 million long-lasting ITNs through UNICEF for free distribution to children under two as part of the November 2006 measles campaign.

Democratic Republic of Congo: 1 million nets have been distributed over a period of four years from 2003 to 2006.

Tanzania: ITNs are being rolled-out through a subsidised voucher scheme for pregnant women involving over 3,000 service delivery outlets. This is enabling more women to access ITNs, and is helping create more demand for local production.

UK support to International Organisations and Partnerships

- $\ensuremath{^{\star}}$ World Health Organization and UNICEF, who provide support to countries to address malaria.
- * GFATM: DFID is a key donor to GFATM having committed GBP 359 million through to 2008 (subject to performance).
- * UNITAID: Supports the provision of drugs and diagnostics for AIDS,

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TB and Malaria. The UK is making a 20-year contribution, starting with GBP 15 million in 2007, and, subject to the outcome of a joint assessment of the performance of UNITAID, rising to GBP 40 million a year by 2010.

* Roll Back Malaria (RBM): Launched in 1998. DFID is a board member and has contributed GBP 49 million to date. The UK contribution for 2006 was GBP 850,000.

Support for Research:

Development of new drugs for malaria: DFID is providing Medicines for Malaria Venture with GBP 10 million over five years (2005-2010) and the Drugs for Neglected Diseases Initiative with GBP 6.5 million over the next three years.

DFID supports consortia led by the London School of Hygiene and Tropical Medicine and the Nuffield Institute at Leeds University for research in communicable diseases including malaria. They receive GBP 5 million each over five years.

End Text.

15. To mark World Malaria Day, DFID issued a press release (available at www.dfid.gov.uk/news/files/pressreleases/bednet-malaria.asp) highlighting the need for more bed nets, access to medicine and research. It also noted that DFID Secretary Hilary Benn would be at a center in Rwanda on that day

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where the anti-malarial bed nets are distributed.

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